

Keep on file until
Nov. 7, 2024

Universal Service for Schools and Libraries

Please read instructions before completing. (To be completed by schools, libraries, or consortia.)

BILLED ENTITY APPLICANT REIMBURSEMENT FORM

For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.
Only one Service Provider Identification Number (SPIN) per form.
Must be completed and signed by the Billed Entity Applicant.
Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

FCC NOTICE FOR INDIVIDUALS REQUIRED BY THE PRIVACY ACT AND THE PAPERWORK REDUCTION ACT
Part 54 of the Commission's Rules authorizes the FCC to collect the information on this form. Failure to provide all requested information will delay the processing of the application or result in the application being returned without action. Information requested by this form will be available for public inspection. Your response is required to obtain the requested authorization.

The public reporting for this collection of information is estimated to range from 1 to 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the required data, and completing and reviewing the collection of information. If you have any comments on this burden estimate, or how we can improve the collection and reduce the burden it causes you, please write to the Federal Communications Commission, AMD-PERM, Paperwork Reduction Act Project (3060-0856), Washington, DC 20554. We will also accept your comments regarding the Paperwork Reduction Act aspects of this collection via the Internet if you send them to PRA@fcc.gov. PLEASE DO NOT SEND YOUR RESPONSE TO THIS FORM TO THIS ADDRESS.

Remember - You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number or if we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-0856.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, PUBLIC LAW 93-579, DECEMBER 31, 1974, 5 U.S.C. 552a(e)(3) AND THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

Applicant Form Identifier (Create an identifier for your own reference) FCC Form 472 Invoice #
FCY18LD-2 (To be inserted by administrator) 2467601

BLOCK 1: HEADER INFORMATION

1. Billed Entity Name FALLS CITY INDEP SCHOOL DIST

2. Billed Entity Number 141507

3. Service Provider Identification Number (SPIN) 143001192

Applicant FCC Form 498 ID 443000505

4 Contact Name PATRICIA STARTZ

5 Contact Telephone Number 830-2543551 ext 221

Reimbursement Amount (total from Block 2, Column 14) \$57.46

2.sl.universalservice.org/bear/5/printbear.aspx?id=2467601 11/7/201

Billed Entity Applicant Reimbursement Form
For reimbursement of discounts on approved services already paid for by the Billed Entity Applicant.

Billed Entity Name FALLS CITY INDEP SCHOOL DIST Billed Entity Number 141507
 Contact Name PATRICIA STARTZ Contact Telephone Number 830-2543551221
 Applicant Form Identifier FCY18LD-2

BLOCK 2: LINE ITEM INFORMATION PER FUNDING REQUEST NUMBER

	(7) FCC Form 471 Application Number (from Funding Commitment Decision Letter)	(8) Funding Request Number (FRN) (from Funding Commitment Decision Letter)	(9) Bill Frequency	(10) Customer Billed Date (mm/yyyy)	(11) Shipping Date to Customer or Last Day of Work Performed (mm/dd/yyyy)	(12) Total (Undiscounted) Amount for Service	(13) Discount Rate	(14) Amount Billed to USAC (Column 12 multiplied by Column 13)
			DO NOT WRITE IN THIS COLUMN.	For each FRN, complete either Column (10) or Column (11), but not both Columns				
1	997755	2720006	MONTHLY		6/30/2016	\$143.66	40.00	\$57.46
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								

TOTAL REIMBURSEMENT AMOUNT TO BE ENTERED INTO ITEM (6) \$57.46

BILLED ENTITY APPLICANT Reimbursement Form

Billed Entity Name FALLS CITY INDEP SCHOOL DIST

Billed Entity Number 141507

Contact Name PATRICIA STARTZ

Applicant Form Identifier FCY18LD-2

Block 3: Billed Entity Certification

I declare under penalty of perjury that the foregoing is true and correct and that I am authorized to submit this Billed Entity Applicant Reimbursement Form on behalf of the eligible schools, libraries, or consortia of those entities represented on this Form, and I certify to the best of my knowledge, information and belief, as follows:

- A. The discount amounts listed in this Billed Entity Applicant Reimbursement Form represent charges for eligible services and/or equipment delivered to and used by eligible schools, libraries, or consortia of those entities for educational purposes, on or after the service start date reported on the associated FCC Form 486.
- B. The discount amounts listed in this Billed Entity Applicant Reimbursement Form were already billed by the Service Provider and paid for by the Billed Entity Applicant on behalf of eligible schools, libraries, and consortia of those entities.
- C. The discount amounts listed in this Billed Entity Applicant Reimbursement Form are for eligible services and/or equipment approved by the Fund Administrator pursuant to a Funding Commitment Decision Letter (FCDL).
- D. I acknowledge that I may be audited pursuant to this application and will retain for at least 10 years (or whatever retention period is required by the rules in effect at the time of this certification), after the latter of the last day of the applicable funding year or the service delivery deadline for the funding request any and all records that I rely upon to complete this form.
- E. I certify that, in addition to the foregoing, this Billed Entity Applicant is in compliance with the rules and orders governing the schools and libraries universal service support program, and I acknowledge that failure to be in compliance and remain in compliance with those rules and orders may result in the denial of discount funding and/or cancellation of funding commitments. I acknowledge that failure to comply with the rules and orders governing the schools and libraries universal service support program could result in civil or criminal prosecution by law enforcement authorities.

15. Signature of authorized person Signed electronically by Patricia Startz 16. Date 11/7/2016

17. Printed name of authorized person Patricia Startz

18. Title or position of authorized person Technology Director

19. Telephone number of authorized person 830-2543551 ext 2031

20. Address of authorized person 700 N. Nelson St., #399, Falls City TX 78113-6113

Page 3 of 3 FCC Form 472

July 2016

471 Application Number	997755	Average Bill	40.00	Erate Total Grant	Discount %Est.	60%
Funding Request Number:	2720006	LD-Cont#20100201-402	REMERATE Grant Amount P1	\$ 201.60	-20%	
Company Name:	Spin Number	Account #PCE3000	Bill Date	Pre ERATE Bill	\$ 504.00	40%
Soutwestern Bell Telephone Company		143001192 830-254-3551-273-9 LD	Jul-15	\$ 11.38	\$ 4.55	\$ 6.83
Now AT&T same spin			Aug-15	\$ 26.71	\$ 10.68	\$ 16.03
			Sep-15	\$ 27.62	\$ 11.05	\$ 16.57
			Oct-15	\$ 27.44	\$ 10.98	\$ 16.46
			Nov-15	\$ 21.03	\$ 8.41	\$ 12.62
			Dec-15	\$ 23.77	\$ 9.51	\$ 14.26
Semi Annual Subtotals				\$ 137.95	\$ 55.18	\$ 82.77
					\$ -	\$ -
			Jan-16	\$ 18.74	\$ 11.24	\$ 7.50
			Feb-16	\$ 29.43	\$ 17.66	\$ 11.77
			Mar-16	\$ 27.97	\$ 16.78	\$ 11.19
			Apr-16	\$ 28.35	\$ 17.01	\$ 11.34
			May-16	\$ 22.11	\$ 13.27	\$ 8.84
			Jun-16	\$ 17.06	\$ 10.24	\$ 6.82
Semi Annual Subtotals				\$ 143.66	\$ 86.20	\$ 60.22

If Semi- Annual Discount exceeds REM ERATE Grant Amount P1, then 2nd request must equal the Rem.ERATE Grant Amounty P1.

1516 Request
18-14 Reimb. Estimates
Last Revised: 7/6/2016

471 Application Number	997755	Average Bill	40.00	Erate Total Grant	Discount %Est.	60%					
Funding Request Number:	2720006	LD-Conf#20100201-402	REM.ERATE Grant Amount P1	\$	201.60	-20%					
Company Name:	Spin Number	Account #PCE3000	Bill Date	Pre ERATE Bill	\$	504.00	-20%				
Southwestern Bell Telephone Company		143001192	830-254-3551-273-9 LD	Jul-15	\$	11.38	\$	4.55	\$	6.83	
Now AT&T same spin				Aug-15	\$	26.71	\$	10.68	\$	16.03	
				Sep-15	\$	27.62	\$	11.05	\$	16.57	
				Oct-15	\$	27.44	\$	10.98	\$	16.46	
				Nov-15	\$	21.03	\$	8.41	\$	12.62	
				Dec-15	\$	23.77	\$	9.51	\$	14.26	
Semi Annual Subtotals				\$	137.95	\$	55.18	\$	62.77	\$	146.42
					\$		\$		\$		
				Jan-16	\$	18.74	\$	11.24	\$	7.50	
				Feb-16	\$	29.43	\$	17.66	\$	11.77	
				Mar-16	\$	27.97	\$	16.78	\$	11.19	
				Apr-16	\$	28.35	\$	17.01	\$	11.34	
				May-16	\$	22.11	\$	13.27	\$	8.84	
				Jun-16	\$		\$	-	\$	-	
Semi Annual Subtotals				\$	126.60	\$	75.96	\$		\$	70.46
If Semi- Annual Discount exceeds REM.ERATE Grant Amount P1, then 2nd request must equal the Rem.ERATE Grant Amounty P1.											

**DIR Customer Code:**

PCE3000

Subscriber Address:

FALLS CITY ISD

ATTN: TERI CRAWFORD

P. O. BOX 399

FALLS CITY, TX 78113-0399

Invoice Date: 01/20/2016

Due Date: 2/19/2016

Invoice Number: 16120486N

Invoice Amount: \$23.77

TEX-AN NG Charges (RTI 130100)

Receiving Agency Number: 313

Payee ID Number: 33133133133000

**IMPORTANT NOTICE
TO STATE AGENCIES:**

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*Included
in
Barcl Request.*

Remittance Address:

DEPARTMENT OF INFORMATION RESOURCES

TELECOMMUNICATIONS SERVICES DIVISION

P.O. BOX 13564

AUSTIN, TEXAS 78711

EMPLOYEE FRINGE BENEFIT COST REIMBURSEMENT - To comply with SB 1, 83rd Leg., R.S., Art IX-27, Sect. 6.08, entities making payments from funding sources other than General Revenue are required to remit an additional 1.0% (.010) of the total amount due.

TEX-AN rates include a 12% Cost Recovery Fee

TO SUBMIT BILLING DISPUTES

TITLE 1, PART 10, CHAPTER 207, RULE 207.8 STATES:

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<http://www.dir.state.tx.us/tex-an/survey/index.htm>

For Billing Questions: Call 512-936-4357 or 877-472-4848 (Opt.3) - Send Comments to: telebilling@dir.texas.gov.

For Ordering Questions: Call 512-936-4357 or 877-472-4848 (Opt.4) - Send Comments to: telecom.solutions@dir.texas.gov.



Account: PCE3000

Division Cost Summary

Section 4 - Page 1 of 1

Billing Attention: TERI CRAWFORD
Billing Name: FALLS CITY ISD
Billing Address: P. O. BOX 399
FALLS CITY, TX 78113-0399
Billing TelNo: 830-254-3551

MRC NRC Usage Usage FUSF OCC Total Charges

Agency Totals for PCE3000

TEX-AN NEXT GEN	0.00	0.00	23.77	0.00	0.00	23.77
	0.00	0.00	23.77	0.00	0.00	\$23.77

CE3000	FALLS CITY ISD					
	TEX-AN NEXT GEN	0.00	0.00	23.77	0.00	0.00
						23.77
	Division Total:					23.77

MRC - Monthly Recurring Charge
NRC - Non Recurring Charges and Credits
Usage - Charges for long distance calls

Usage FUSF - Federal Universal Service Fee
OCC - Other Charges and Credits



Summary of Telephone Related Services and Equipment

Section 5 - Page 1 of 1

For Account: CE3000 FALLS CITY ISD

Monthly Usage Summary

Type	# of Calls	Minutes	Amount
ATT INTERLATA SW-SW	99	412.2	11.05
ATT INTERSTATE SW-SW	8	38.9	1.03
ATT INTRALATA SW-SW	220	436.1	11.69
	<u>327</u>	<u>887.2</u>	<u>\$23.77</u>



Summary of Telephone Related Charges by Phone Number

Section 6 - Page 1 of 1

For Account: CE3000 FALLS CITY ISD

Telephone	Subscriber Name	Auth Code ID	Non-Auth Code Usage	Auth Code Usage	Recurring Svc&Eqp	Total
830-254-3354			0.28	0.00	\$0.00	\$0.28
830-254-3480			0.11	0.00	\$0.00	\$0.11
830-254-3484			3.88	0.00	\$0.00	\$3.88
830-254-3512			19.46	0.00	\$0.00	\$19.46
830-254-3513				0.00	\$0.00	
830-254-3513				0.00	\$0.00	
830-254-3551			0.04	0.00	\$0.00	\$0.04
830-254-3552				0.00	\$0.00	
830-254-3552				0.00	\$0.00	
830-254-3588				0.00	\$0.00	
830-254-3588				0.00	\$0.00	
830-254-3939				0.00	\$0.00	
830-254-3939				0.00	\$0.00	
Total Telephone Related Charges			\$23.77	\$0.00	\$0.00	\$23.77



Department of Information Resources

Statewide Technology Operations Division

INVOICE for 01/01/16 to 01/31/16

Section 1 - Page 1 of 1

DIR Customer Code:

PCE3000

Subscriber Address:

FALLS CITY ISD

ATTN: TERI CRAWFORD

P. O. BOX 399

FALLS CITY, TX 78113-0399

Invoice Date:

02/19/2016

Due Date:

03/19/2016

Invoice Number:

16010486N

Invoice Amount:

\$18.74

Receiving Agency Number:

313

Payee ID Number:

33133133133000

**IMPORTANT NOTICE
TO STATE AGENCIES:**

DIR Services are funded through unique appropriations in USAS;
therefore, it is critical that when entering payments in USAS
that the correct Recurring Transaction Index (RTI) and invoice number be referenced.

Remittance Address:

DEPARTMENT OF INFORMATION RESOURCES

TELECOMMUNICATIONS SERVICES DIVISION

P.O. BOX 13564

AUSTIN, TEXAS 78711

EMPLOYEE FRINGE BENEFIT COST REIMBURSEMENT - To comply with SB 1, 83rd Leg.,
R.S., Art IX-27, Sect. 6.08, entities making payments from funding sources other than
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TEX-AN rates include a 12% Cost Recovery Fee

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How are we doing? So that we may improve all of our Communications Technology Service Processes to
better meet your needs, we ask that you take a moment to answer a few questions about your experience
with us. Please visit the following link to provide us with valuable feedback to help improve these services.

<http://www.dir.state.tx.us/tex-an/survey/index.htm>



Summary of Telephone Related Charges by Phone Number

Section 6 - Page 1 of 1

For Account: CE3000 FALLS CITY ISD

Telephone	Subscriber Name	Auth Code ID	Non-Auth Code Usage	Auth Code Usage	Recurring Svc&Eqp	Total
830-254-3354			\$0.63	\$0.00	\$0.00	\$0.63
830-254-3480			\$0.06	\$0.00	\$0.00	\$0.06
830-254-3484			\$1.89	\$0.00	\$0.00	\$1.89
830-254-3512			\$20.21	\$0.00	\$0.00	\$20.21
Total Telephone Related Charges			\$22.79	\$0.00	\$0.00	\$22.79



Department of Information Resources

Statewide Technology Operations Division

INVOICE for 02/01/16 to 02/29/16

Section 1 - Page 1 of 1

DIR Customer Code:

PCE3000

Subscriber Address:

FALLS CITY ISD

ATTN: TERI CRAWFORD

P. O. BOX 399

FALLS CITY, TX 78113-0399

Invoice Date: 03/21/2016

Due Date: 04/21/2016

Invoice Number: 1602487N

Invoice Amount: \$29.43

TEX-AN NG Charges (RTI 130100)

Receiving Agency Number: 313

Payee ID Number: 33133133133000

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Remittance Address:

DEPARTMENT OF INFORMATION RESOURCES

TELECOMMUNICATIONS SERVICES DIVISION

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AUSTIN, TEXAS 78711

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Account: PCE3000

Division Cost Summary

Section 4 - Page 1 of 1

Billing Attention: TERI CRAWFORD
Billing Name: FALLS CITY ISD
Billing Address: P. O. BOX 399
FALLS CITY, TX 78113-0399
Billing TelNo: 830-254-3551

		MRC	NRC	Usage	Usage FUSF	OCC	Total
Agency Totals for PCE3000							
TEX-AN NEXT GEN		0.00	0.00	29.43	0.00	0.00	29.43
		0.00	0.00	29.43	0.00	0.00	29.43
CE3000	FALLS CITY ISD						
TEX-AN NEXT GEN		0.00	0.00	29.43	0.00	0.00	29.43
Division Total:							29.43

MRC - Monthly Recurring Charge
NRC - Non Recurring Charges and Credits
Usage - Charges for long distance calls

Usage FUSF - Federal Universal Service Fee
OCC - Other Charges and Credits



Summary of Telephone Related Charges by Phone Number

Section 6 - Page 1 of 1

For Account: CE3000 FALLS CITY ISD

Telephone	Subscriber Name	Auth Code ID	Non-Auth Code Usage	Auth Code Usage	Recurring Svc&Eqp	Total
830-254-3354			\$0.51	\$0.00	\$0.00	\$0.51
830-254-3480			\$0.11	\$0.00	\$0.00	\$0.11
830-254-3484			\$5.31	\$0.00	\$0.00	\$5.31
830-254-3512			\$23.45	\$0.00	\$0.00	\$23.45
830-254-3551			\$0.05	\$0.00	\$0.00	\$0.05
Total Telephone Related Charges			\$29.43	\$0.00	\$0.00	\$29.43



DIR Customer Code:

PCE3000

Subscriber Address:

FALLS CITY ISD

ATTN: TERI CRAWFORD

P. O. BOX 399

FALLS CITY, TX 78113-0399

Invoice Date:

04/20/2016

Due Date:

05/20/2016

Invoice Number:

16030487N

Invoice Amount:

\$27.97

TEX-AN NG Charges (RTI 130100)

Receiving Agency Number:

313

Payee ID Number:

33133133133000

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Remittance Address:

DEPARTMENT OF INFORMATION RESOURCES

TELECOMMUNICATIONS SERVICES DIVISION

P.O. BOX 13564

AUSTIN, TEXAS 78711

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Account: PCE3000

Division Cost Summary

Section 4 - Page 1 of 1

Billing Attention: TERI CRAWFORD
Billing Name: FALLS CITY ISD
Billing Address: P. O. BOX 399
FALLS CITY, TX 78113-0399
Billing TelNo: 830-254-3551

	MRC	NRC	Usage	Usage FUSF	OCC	Total
Agency Totals for PCE3000						
TEX-AN NEXT GEN	0.00	0.00	27.97	0.00	0.00	27.97
	0.00	0.00	27.97	0.00	0.00	27.97
CE3000						
FALLS CITY ISD						
TEX-AN NEXT GEN	0.00	0.00	27.97	0.00	0.00	27.97
Division Total:						27.97

MRC - Monthly Recurring Charge
NRC - Non Recurring Charges and Credits
Usage - Charges for long distance calls

Usage FUSF - Federal Universal Service Fee
OCC - Other Charges and Credits



Summary of Telephone Related Charges by Phone Number

Section 6 - Page 1 of 1

For Account: CE3000 FALLS CITY ISD

Telephone	Subscriber Name	Auth Code ID	Non-Auth Code Usage	Auth Code Usage	Recurring Svc&Eqp	Total
830-254-3354			\$0.55	\$0.00	\$0.00	\$0.55
830-254-3480			\$0.07	\$0.00	\$0.00	\$0.07
830-254-3484			\$3.83	\$0.00	\$0.00	\$3.83
830-254-3512			\$23.52	\$0.00	\$0.00	\$23.52
Total Telephone Related Charges			\$27.97	\$0.00	\$0.00	\$27.97

DIR Customer Code:
PCE3000

Subscriber Address:
FALLS CITY ISD
ATTN: TERI CRAWFORD
P. O. BOX 399
FALLS CITY, TX 78113-0399

Invoice Date: 05/20/2016
Due Date: 06/20/2016
Invoice Number: 16040472N
Invoice Amount: \$28.35
TEX-AN NG Charges (RTI 130100)
Receiving Agency Number: 313
Payee ID Number: 33133133133000

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Remittance Address:
DEPARTMENT OF INFORMATION RESOURCES
TELECOMMUNICATIONS SERVICES DIVISION
P.O. BOX 13564
AUSTIN, TEXAS 78711

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Department of Information Resources

Statewide Technology Operations Division

INVOICE for 05/01/16 to 05/31/16

Section 1 - Page 1 of 1

DIR Customer Code:

PCE3000

Subscriber Address:

FALLS CITY ISD

ATTN: TERI CRAWFORD

P. O. BOX 399

FALLS CITY, TX 78113-0399

Invoice Date: 06/20/2016

Due Date: 07/20/2016

Invoice Number: 16050473N

Invoice Amount: \$22.11

TEX-AN NG Charges (RTI 130100)

Receiving Agency Number: 313

Payee ID Number: 33133133133000

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AUSTIN, TEXAS 78711

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TITLE 1, PART 10, CHAPTER 207, RULE 207.8 STATES:

Each user shall notify DIR of any billing errors, in writing, within twenty-one (21) days of
receipt of invoice. Any requests for additional time beyond the twenty-one (21) day period
are subject to written approval by the director of DIR or the DIR Fiscal Division, or their
designees.

How are we doing? So that we may improve all of our Communications Technology Service Processes to
better meet your needs, we ask that you take a moment to answer a few questions about your experience
with us. Please visit the following link to provide us with valuable feedback to help improve these services.

<http://www.dir.state.tx.us/tex-an/survey/index.htm>



Account: PCE3000

Division Cost Summary

Section 4 - Page 1 of 1

Billing Attention: TERI CRAWFORD
Billing Name: FALLS CITY ISD
Billing Address: P. O. BOX 399
FALLS CITY, TX 78113-0399
Billing TelNo: 830-254-3551

	MRC	NRC	Usage	Usage FUSF	OCC	Total
Agency Totals for PCE3000						
TEX-AN NEXT GEN	0.00	0.00	22.11	0.00	0.00	22.11
	0.00	0.00	22.11	0.00	0.00	22.11
<hr/>						
CE3000 FALLS CITY ISD						
TEX-AN NEXT GEN	0.00	0.00	22.11	0.00	0.00	22.11
Division Total:						22.11

MRC - Monthly Recurring Charge
NRC - Non Recurring Charges and Credits
Usage - Charges for long distance calls

Usage FUSF - Federal Universal Service Fee
OCC - Other Charges and Credits



Summary of Telephone Related Charges by Phone Number

Section 6 - Page 1 of 1

For Account: CE3000 FALLS CITY ISD

Telephone	Subscriber Name	Auth Code ID	Non-Auth Code Usage	Auth Code Usage	Recurring Svc&Eqp	Total
830-254-3354			\$0.67	\$0.00	\$0.00	\$0.67
830-254-3480			\$0.56	\$0.00	\$0.00	\$0.56
830-254-3484			\$3.08	\$0.00	\$0.00	\$3.08
830-254-3512			\$17.69	\$0.00	\$0.00	\$17.69
830-254-3551			\$0.11	\$0.00	\$0.00	\$0.11
Total Telephone Related Charges			\$22.11	\$0.00	\$0.00	\$22.11